

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Aug</i>		8/17W
O.I.P.E. CLASSIFIER		21	8/22/00
FORMALITY REVIEW	<i>SJ</i>	75333	9-23W
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1 ✓	8/12/00
2 ✓	✓ ✓ ✓
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Claim	Date
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Form PT  
(Rev. 8/8)

If more than 150 claims or 10 actions  
staple additional sheet here

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